



**CONTRACT AWARD SHEET**  
**Internal Services Department**  
**Procurement Management Services**

*Bid No. **RTQ-00272***  
*Award Sheet*

**PROCUREMENT** DIVISION

BID NO.: **RTQ-00272**

PREVIOUS BID NO.: **7676-1/15-1**

TITLE: **ID CARDS,PRINTERS,SUPPLIES & ACCESSORIES**

CURRENT CONTRACT PERIOD: **06/01/2016** through **05/31/2024**

Total # of OTRs: **0**

**MODIFICATION HISTORY**

*Bid No. **RTQ-00272***

*Award Sheet*

**DPM Notes**

**APPLICABLE ORDINANCES**

LIVING WAGE: **No**

UAP: **Yes**

IG: **Yes**

OTHER APPLICABLE ORDINANCES:

**CONTRACT AWARD INFORMATION:**

**No** Local Preference

**No** Micro Enterprise

**No** Full Federal Funding

**No** Performance Bond

**Yes** Small Business Enterprise (SBE)

**No** PTP Funds

**No** Partial Federal Funding

**No** Insurance

Miscellaneous:

REQUISITION NO.: **RQID1500115**

PROCUREMENT AGENT: **CAMPBELL, ROMA**

PHONE: 305 375-3233

FAX: 305 375-4407

EMAIL: **RCAMP@MIAMIDADE.GOV**

DEPARTMENT OF PROCUREMENT MANAGEMENT  
PROCUREMENT DIVISION

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VENDOR NAME: **BARCODES LLC**  
 DBA: **BARCODES INC**  
 FEIN: **203290210** SUFFIX : **01** 60606  
 STREET: **200 W MONROE ST, 10TH FLOOR SUITE 1000** CITY: **CHICAGO** ST: **IL** ZIP:  
 FOB\_TERMS: **DEST-P** DELIVERY: **AS REQUESTED**  
 PAYMENT TERMS: **NET30** TOLL PHONE: **-**

**VENDOR INFORMATION:***CERTIFIED VENDOR**ASSIGNED MEASURES*Local Vendor: **No**

SBE	<b>No</b>	Set Aside	<b>No</b>	Bid Pref.	<b>No</b>
Micro Ent.	<b>No</b>	Selection Factor	<b>No</b>	Goal	<b>No</b>
Other:				Vendor Record Verified? <b>Yes</b>	

\*\*\*\*\*

**Vendor Contacts:**

Name	Phone1	Phone2	Fax	Email Address
JOE PUSCHAUTZ	312-582-4821	-	312-212-1800	STATEGOV@BARCODESINC.COM

VENDOR NAME: **DIEBOLD INC**  
 DBA:  
 FEIN: **340183970** SUFFIX : **01** 44720  
 STREET: **5995 MAYFAIR ROAD** CITY: **NORTH CANTON** ST: **OH** ZIP:  
 FOB\_TERMS: **DEST-P** DELIVERY: **AS REQUESTED**  
 PAYMENT TERMS: **NET30** TOLL PHONE: **800-8066827**

**VENDOR INFORMATION:***CERTIFIED VENDOR**ASSIGNED MEASURES*Local Vendor: **No**

SBE	<b>No</b>	Set Aside	<b>No</b>	Bid Pref.	<b>No</b>
Micro Ent.	<b>No</b>	Selection Factor	<b>No</b>	Goal	<b>No</b>
Other:				Vendor Record Verified? <b>Yes</b>	

\*\*\*\*\*

**Vendor Contacts:**

Name	Phone1	Phone2	Fax	Email Address
Miguel Casanova-MGR	646-3026411	800-8066827	954-3439818	MIGUEL.CASANOVA@DIEBOLD.COM

VENDOR NAME: **IDENTISYS INCORPORATED**  
 DBA:  
 FEIN: **411938567** SUFFIX : **02** CITY: **EDEN PRAIRIE** ST: **MN** ZIP: **55344**  
 STREET: **7630 COMMERCE WAY** DELIVERY: **AS REQUESTED**  
 FOB TERMS: **DEST-P** TOLL PHONE: **877-437-3724**  
 PAYMENT TERMS: **NET30**

**VENDOR INFORMATION:**

*CERTIFIED VENDOR*

*ASSIGNED MEASURES*

Local Vendor: **No**

SBE	<b>No</b>	Set Aside	<b>No</b>	Bid Pref.	<b>No</b>
Micro Ent.	<b>No</b>	Selection Factor	<b>No</b>	Goal	<b>No</b>
Other:	Vendor Record Verified? <b>Yes</b>				

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**Vendor Contacts:**

Name	Phone1	Phone2	Fax	Email Address
BARBARA BEECHER	954-452-5228	877-437-3724	954-452-5848	BARBARA_BEECHER@IDENTISYS.COM

VENDOR NAME: **LRE INC**  
 DBA: **LEE RYDER LAMINATION**  
 FEIN: **650345271** SUFFIX : **01** CITY: **MIAMI** ST: **FL** ZIP: **33015**  
 STREET: **6187 NW 167 STREET** DELIVERY: **AS REQUESTED**  
 FOB TERMS: **DEST-P** TOLL PHONE: **800-624-1980**  
 PAYMENT TERMS: **NET14**

**VENDOR INFORMATION:**

*CERTIFIED VENDOR*

*ASSIGNED MEASURES*

Local Vendor: **Yes**

SBE	<b>Yes</b>	Set Aside	<b>Yes</b>	Bid Pref.	<b>Yes</b>
Micro Ent.	<b>Yes</b>	Selection Factor	<b>No</b>	Goal	<b>No</b>
Other:	Vendor Record Verified? <b>Yes</b>				

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**Vendor Contacts:**

Name	Phone1	Phone2	Fax	Email Address
LEE RYDER	305-893-2762	800-624-1980	305-893-2775	OFFICE@LEERYDER.COM

**ITEMS AWARDED Section:**Details: **RTQ-00272****SPOT MARKET QUOTES WILL BE CONDUCTED BY EACH DEPARTMENTS.**Item # DescriptionQtyUnit Price**End of ITEMS AWARDED Section****AWARD INFORMATION Section**BCC Award: **No**DPM Award: **No**BCC Date: **05/17/2016**DPM Date: **03/21/2016**Contract Amount: \$ **3,063,000.00**

Additional Items Allowed:

Agenda Item No.: **8(F)(5)(160627)**

Special Conditions:

**BPO INFORMATION Section:**

1	<b>ABCW1600447</b>																
<table> <tr> <th>Commodity ID</th><th>Commodity Name</th></tr> <tr> <td>665-42</td><td>LAMINATING PRESSES, FILM, ID POUCHES,</td></tr> </table>		Commodity ID	Commodity Name	665-42	LAMINATING PRESSES, FILM, ID POUCHES,												
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**End of BPO Information Section**